

SUMTER CITY-COUNTY PLANNING COMMISSION

POST OFFICE BOX 1449 SUMTER, SOUTH CAROLINA 29151 (803) 774-1600



COMPREHENSIVE PLAN ORDINANCE / MAP AMENDMENT
CITY COUNTY

	□ Map □ Text
Applicant's Name:	
Applicant's Address:	
	Street Phone
	City State Zip
Proposed Text Amendment:	
Proposed Map Amen	dment:
Гах Мар No	Address:
_	restricted by any recorded covenant that is contrary to, conflicts activity described in this permit?
Adjacent	Land Use Designation Use
-	
Property: North of: East of:	
Property: North of:	
Property: North of: East of: South of: West of:	for Proposed Amendment:
Property: North of: East of: South of: West of:	for Proposed Amendment:
Property: North of: East of: South of: West of: Justification/Reason Signature of Application CERTIFICATION I hereby certify that I the best of my knowled State Laws related to authorization to act a	for Proposed Amendment:
Property: North of: East of: South of: West of: Ustification/Reason Signature of Application CERTIFICATION I hereby certify that I the best of my knowled State Laws related to authorization to act a herein may result in respect to the state of the s	for Proposed Amendment: Date have read this application and the information supplied herein is true and correct tedge. I agree to comply with all applicable City and/or County Ordinances and o land development. I am the property owner, or have received the owner's writter is his/her agent regarding this matter. I understand that falsifying any information
Property: North of: East of: South of: West of: Justification/Reason Signature of Application CERTIFICATION I hereby certify that I the best of my knowled State Laws related to authorization to act a herein may result in result in result. Property Owner or An APPLICATION MUSTAPPLICATION MUSTAPPLIC	for Proposed Amendment: Date have read this application and the information supplied herein is true and correct redge. I agree to comply with all applicable City and/or County Ordinances and a land development. I am the property owner, or have received the owner's writter is his/her agent regarding this matter. I understand that falsifying any information nullification of this request and/or appropriate legal remedies. uthorized Agent Name, Signature and Date

Meeting Date

Reviewed By